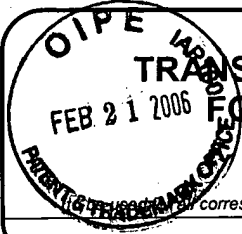
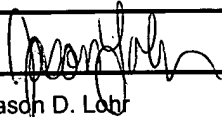
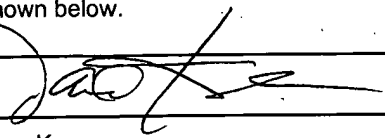


|   |                      |                        |                 |
|---|----------------------|------------------------|-----------------|
|  | Application Number   | 10/040,397             |                 |
|   | Filing Date          | December 28, 2001      |                 |
|   | First Named Inventor | Alan BALLARD           |                 |
|   | Art Unit             | 2174                   |                 |
|   | Examiner Name        | R. Pitaro              |                 |
| Total Number of Pages in This Submission  |                      | 27                     |                 |
|   |                      | Attorney Docket Number | 021756-019500US |

| ENCLOSURES (Check all that apply)  |  |   |
|--|--|---|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input checked="" type="checkbox"/> Extension of Time Request with fee authorization.<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/ Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br><input type="checkbox"/> Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br><br>Return Postcard; Request for Continued Examination (RCE) with fee authorization. |
| Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.  |  |   |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT   |  |   |
| Firm Name  | Townsend and Townsend and Crew LLP   |   |
| Signature  |   |   |
| Printed name   | Jason D. Lohr  |   |
| Date   | 02/16/2006   | Reg. No. 48,163   |

| CERTIFICATE OF TRANSMISSION/MAILING   |   |                 |
|---|---|-----------------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. |   |                 |
| Signature   |  |                 |
| Typed or printed name   | Dana Kane   | Date 02/16/2006 |